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VACCINE ESTABLISHMENT.

THE BOARD, appointed by His Majesty's Government to regulate the affairs of this Establishment, is constituted of the PRESIDENT and four CENSORS of the ROYAL COLLEGE of PHYSICIANS, and the MASTER and two GOVERNORS of the ROYAL COLLEGE of SURGEONS.

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JAMES MOORE, Esq. Director, *Conduit Street*.
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CHARLES MURRAY, Esq. Secretary, 13, *John Street*,
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ORDERED, by the Board, that the following Description of the Vaccine Disease, and Instructions relating to Vaccination, be generally circulated.

Description of the regular Vaccine Vesicle.

When Vaccination has been successfully performed, a small red spot is formed, on the third day after the operation. If this spot be touched, an elevation is felt; and if it be examined with a magnifying glass, the little tumour appears surrounded with a very slight efflorescence.

The tumour gradually enlarges, and about the sixth day, a circular Vesicle appears. The edge of the Vesicle is elevated, but its centre is depressed. It is at first of a light

pink colour; sometimes of a bluish tint, and changes by degrees to a pearl colour. The centre is somewhat darker than the surrounding parts.

The Vesicle is hard to the touch. In its internal structure it is cellular; the cells are filled with transparent Lymph.

It commonly increases in size till the tenth or eleventh day.

On the seventh or eighth day there is formed round the base of the Vesicle an inflamed ring, which spreads rapidly, and about the tenth day forms an Areola of about an inch and a half in diameter.

This Areola has some degree of hardness and tumefaction. The redness continues for a day or two, and then begins to fade, sometimes forming two or three concentric circles.

After the Areola is formed, the Vesicle begins to decline; the centre first turns brown, and the whole gradually changes into a hard, smooth crust, of a dark mahogany colour. This crust falls off about the end of the third week, leaving a permanent cicatrix.

The first appearance of the Vesicle is seldom earlier, but is often later than has been described. In a few instances, it has not appeared till a fortnight, or even three weeks, after Vaccination; but when the subsequent stages have been regular, the Vaccination has proved efficacious.

Description of irregular Appearances subsequent to Vaccination.

In the irregular Vesicle there is usually a premature itching, inflammation and suppuration; the progress of the

Vesicle is too rapid; its texture is soft, the edge not well defined, the centre elevated, the matter discoloured or purulent. Instead of a regular Areola, a premature efflorescence, of a dusky purple colour, takes place, and the crust is of a light brown or amber colour

The irregular Vesicle is more liable to be broken than the regular, both from its form and texture; and also from its being usually so irritable as to provoke scratching. When broken, this Vesicle is apt to ulcerate.

A Vesicle, apparently regular at first, sometimes does not increase to the proper size, but dies away prematurely. Such a Vesicle usually leaves no cicatrix, or one which is hardly perceptible.

When these, or any other considerable deviations from the regular course of the disease take place, no dependence can be placed on the operation. In such cases Vaccination should be repeated.

Probable Causes of the above Appearances.

If the Lymph for Vaccination be taken from an irregular Vesicle, or perhaps from a regular Vesicle at too late a period; or if the operation be performed with a rusty or unclean lancet; or if the Vesicle be injured in its early stage, and thereby too much inflammation be excited, an irregular Vesicle will probably be produced.

It is proper that the skin should be in a healthy state at the period of Vaccination; because it has been suspected that when it is affected with disease, a regular Vesicle is not produced, and Vaccination in consequence is apt to fail.

The Method of taking and preserving Vaccine Lymph.

Lymph for Vaccination should be taken by means of slight superficial punctures made in a Vaccine Vesicle, with the point of a lancet, time being allowed for it to exude in small pellucid drops.

This operation should be performed with the greatest degree of delicacy, that the Vesicle may sustain as little injury as possible.

Lymph for Vaccination is found to be most certainly efficacious when taken from the time of its production to the eighth day inclusive. But in cases of necessity it may be used at more advanced periods; the dried crusts having frequently communicated the perfect disease.

When Lymph is to be used immediately, or in a few days, it may be taken on a lancet; but it cannot be thus preserved for any length of time, as it soon rusts the lancet, and may become by decomposition inefficacious or even injurious.

Lymph may be preserved on points of quill or ivory, which should be charged a second or a third time, after the Lymph has become dry, or it may be enclosed between two small squares of glass. When the fluid has been received in sufficient quantity upon one of the squares, it should be covered with the other, and both should be wrapped up in paper or gold-beater's skin. Glass capillary tubes preserve Vaccine Lymph for a long period in a liquid state. When a tube is to be filled, care should be taken that both extremities are open; and after puncturing a Vesicle, as soon as a globule of fluid has exuded, one of the ends of the tube is to be immersed

in the Lymph which will instantly be absorbed. By repeating this dexterously a tube of three or four inches may often be filled. Both ends of the tube are to be hermetically sealed by the flame of a lighted taper.

Glass tubes with bulbs may also be employed for the same purpose. This species of tube is to be charged by applying a lighted taper to the bulb for a moment, and adjusting the extremity to a punctured Vesicle. When the taper is withdrawn the Lymph ascends into the tube, which should be closed hermetically.

The Manner of Vaccinating.

In the operation of Vaccination, the skin being stretched, the point of a lancet charged with Lymph should be introduced, obliquely, through the cuticle till it touches the cutis, and it should be retained there for a few seconds.

The operation may be performed on the arm, or on any other convenient part of the body; and as the prevention of Small-Pox depends upon the constitution being completely infected with the Vaccine, it is recommended to make four punctures in every case; two in each arm.

When however two perfect Vesicles arise and proceed regularly to their conclusion, the Vaccination is to be considered complete.

Lymph should only be taken from those cases in which three or four Vesicles have formed; *and one of the Vesicles, at least, should always be permitted to pass through its regular course, without being punctured or otherwise disturbed.*

Recent and fluid Lymph should be preferred, whenever it can be conveniently procured.

When dry Lymph on glass is used, it should be moistened with a little *cold* water, applied by the point of a lancet, allowing time for it to dissolve, and should be inserted in the same manner as if the recent fluid had been employed.

When quills, or ivory points, charged with dry Lymph are used, a very slight puncture should first be made with a common lancet, into which the quill or ivory point should be inserted, and be retained in the puncture half a minute or more, that the Lymph may by solution remain in the wound. If the part of the instrument which is charged be afterwards wiped repeatedly upon the edges of the puncture, it will tend still more to ensure the success of the operation.

In order to extract the fluid Lymph from one of the capillary tubes, the two points should first be broken off; then by means of a blow-pipe, or a fine hollow straw adjusted to one of the ends, the Lymph may be blown out and received on a bit of glass.

When the Lymph has been preserved in a tube with a bulb, it may be expelled by applying the flame of a taper to the bulb.

Crusts of perfect Vesicles, even after being preserved many months, are often found effective. The crust is to be reduced to a fine powder in a mortar, and then mixed with cold water to the consistence of a mucilage. Vaccination may be performed with this thick liquid in the usual manner.

Testing, or re-vaccinating in four places, as at first, should be had recourse to on the following occurrences.

Whenever only one Vesicle has been excited: when, though more have been excited, all have been broken, disturbed, or

opened : when the Areolæ have been wanting : and when the Vesicles have suppurated or deviated in any other respect from the course of the regular Vaccine.

Lancets for Vaccination should be kept clean and bright, and they should be dipped in water, and wiped after each operation, even when several successive operations are to be performed.

Symptoms of Infection.

Constitutional symptoms from Vaccination sometimes occur at a very early period, but more commonly from the seventh to the eleventh day. The usual signs of febrile affection, are drowsiness, restlessness, a chilliness succeeded by heat, thirst, and head-ach. Sometimes sickness and vomiting occur, especially in infants. But the symptoms of constitutional disease are in general slight and transient. In a great proportion of cases there is no perceptible indisposition ; nevertheless the subject is secure from the infection of Small-Pox, when the progress of the Vaccine Vesicles has been regular and complete.

Treatment.

The Vesicle when formed should be carefully defended from irritation, or injury.

Medicine, in general, is not required in this mild disease. If, however, the febrile symptoms should be higher than usual, the disorder should be treated as inflammatory fever.

No medicines are necessary before Vaccination, but the subject should be free from obvious disease. Cathartics need rarely be given after the Vaccine disease.

Should the local inflammation exceed the usual bounds, which rarely happens except from external violence, it may be soon checked by the application of compresses of linen dipped in the common saturnine solution.

Where ulceration ensues, Ceratum Cetacei, or Ceratum Plumbi Compositum may be applied ; or such surgical treatment adopted, as the case may require.

The irregular Vesicle is frequently followed by ulceration at an early period, which will require the same treatment, as if it proceeded from the regular Vesicle.

When the patient has been previously exposed to the infection of Small-Pox, this disease will be either superseded or not, according to the time which has elapsed before Vaccination.

The Board having ascertained, that almost all the failures in Vaccination arise from a different practice, earnestly request, that all Vaccinators will carefully attend to the above Instructions.

Recent Vaccine Lymph being greatly preferable to dried, Surgeons are earnestly requested to use the former, if possible ; and to keep up a supply, as far as is practicable, by successive Vaccinations.

Medical Practitioners in all parts of the Empire may be supplied with Vaccine Lymph, without any expense, from the NATIONAL VACCINE ESTABLISHMENT.

Lymph is dispensed at the Establishment, from Eleven in the Morning, until Two in the Afternoon, daily : Sunday excepted.

Applications for Lymph, and Letters and Communications
respecting Vaccination should be addressed

To Dr. HERVEY, Registrar of the N. V. E.,
Percy Street, Bedford Square;

Under a Cover, directed thus :

To the Right Hon^{ble}
The Secretary of State
for the Home Department,
Whitehall.

*National Vaccine
Establishment.*

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